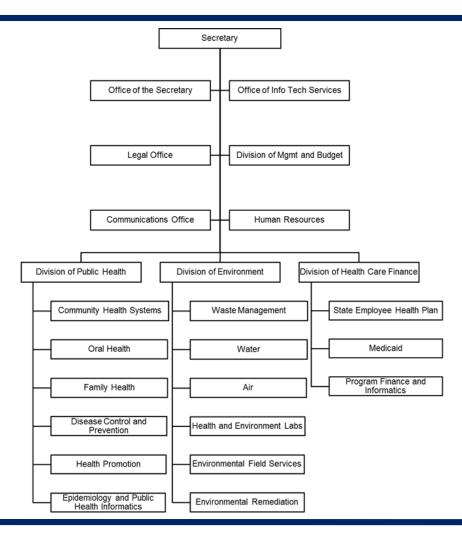


# Department of Health and Environment

Susan Mosier, MD, MBA, FACS Secretary and State Health Officer

Agency Budget Overview
Senate Ways and Means Social Services Subcommittee
Feb. 16, 2017

# **Agency Organizational Chart**





## **Agency Mission and Vision**

#### **Agency Mission**

 To protect and improve the health and environment of all Kansans.

#### **Agency Vision**

Healthy Kansans living in safe and sustainable environments.



## **Priorities**

#### **Operational Efficiencies**

- Continue to review organizational structure to identify areas for consolidation or better functional alignment
- Review each vacant position to determine if position requires rehiring
- Encourage process review through Continuous Quality Improvement projects at all levels of the agency



## **Strategic Initiatives**

- Kansas Modular Medicaid System (KMMS)
- Kansas Eligibility Enforcement System (KEES)
- Public Health Accreditation



## **KMMS**

#### Kansas Modular Medicaid System

- Provide a 360 degree view of a Medicaid beneficiary in order to meet that individual's needs holistically
- Break down silos of: agencies and organizations, data, funding
- Facilitate increased and improved coordination and integration of services
- Provide skinny data



## **KEES**

#### Kansas Eligibility Enforcement System

- Self Service Portal (SSP) allowed 59,723 people to apply for Medicaid and CHIP benefits online through December 15, 2016, representing 36 percent of the total applications received
- Expected to receive approximately 65,695 online applications in 2017
- Working on strategies to encourage more applicants to use the online process
- Ability for no-touch processing



### **Public Health Accreditation**

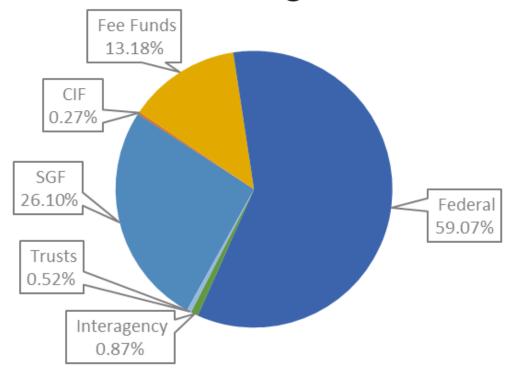
Accredited by the Public Health Accreditation Board (PHAB)

- Quality Improvement
- Measures performance against nationally recognized standards
- Supports continual development, revision and distribution of public health standards
- Site visit anticipated in summer of 2017



# Funding Sources – FY 2017

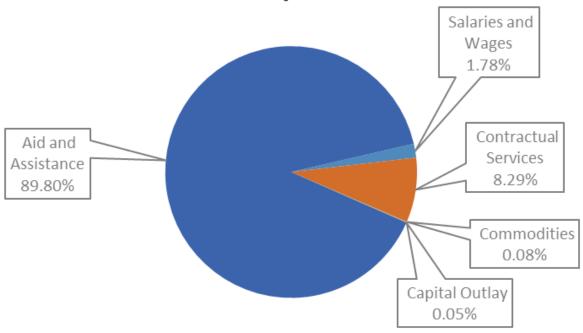
#### **Health Funding Sources**





## Expenditures – FY 2017

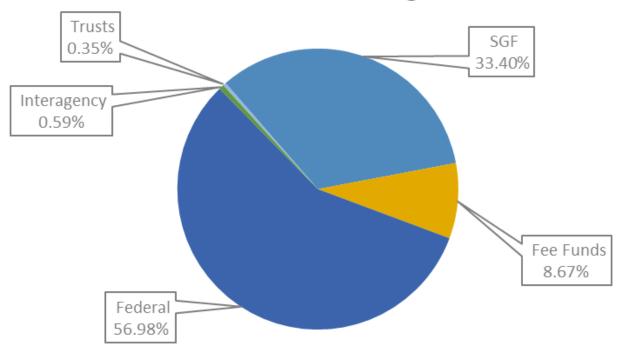
#### **Health Expenditures**





## Funding Sources – FY 2018

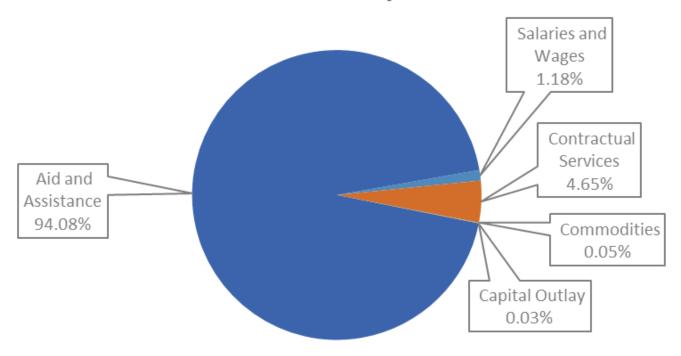
#### **FY 2018 Health Funding Sources**





## Expenditures – FY 2018

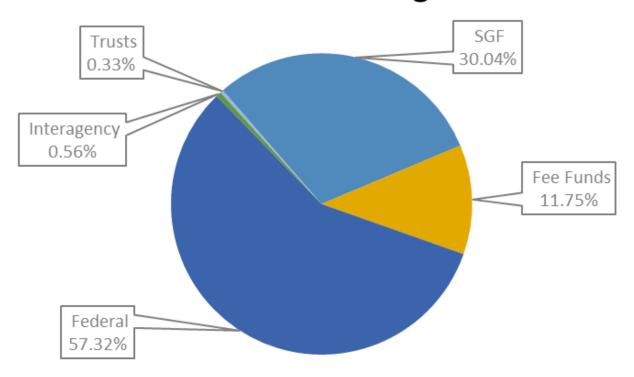
#### **FY 2018 Health Expenditures**





# Funding Sources – FY 2019

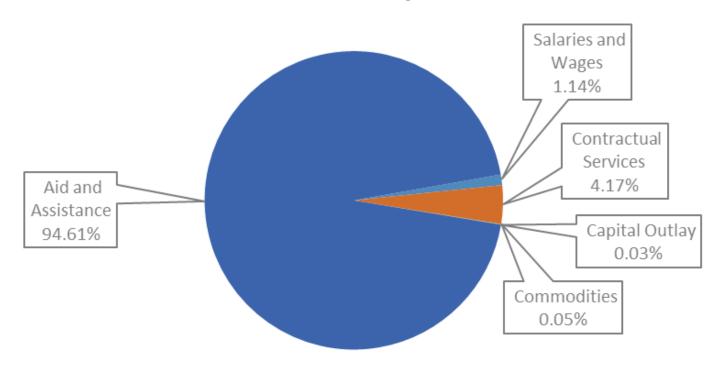
#### **FY 2019 Health Funding Sources**





## Expenditures – FY 2019

#### **FY 2019 Health Expenditures**





# Division of Public Health Data Trends

- All funds budget
  - Down 0.5% from FY 2014 to FY 2019
  - Down 2.5% from FY 2017 to FY 2019
- SGF budget
  - Down 4.4% from FY 2014 to FY 2019
  - Down 3.2% from FY 2017 to FY 2019



## **Budget Drivers**

- Medicaid Caseloads
- Federal Match Requirements
- Cost shifting to the states due to changes in federal statutes and regulations, e.g.:
  - Medicare Part B Premium Increases
  - Health Insurance Provider Fee (HIPF)
- High cost drugs (e.g., Hepatitis C)



# Division of Health Care Finance (DHCF)

#### **Medicaid Caseloads Process**

- Budget reflects need
- Level determined by Estimating Group that meets twice per year
- Increases are a combination of:
  - Additional federal requirements
  - Population growth
  - Cost growth
  - Population shifts



### **Division of Administration**

#### The Division of Administration includes:

- Office of the Secretary
- Management and Budget
- Human Resources
- Office of Information Technology
- Legal Services
- Communications



## **DHCF Accomplishments**

- \$1.4 billion in estimated cost savings
- Improved health outcomes including:
  - Improved alcohol/drug treatment
  - Increased well child visits
  - Improved care of diabetics
  - Increased employment for adults with Serious and Persistent Mental Illness (SPMI)
  - Decrease in readmissions after discharge
- The State Employee Health Plan received an Edington CBIZ Great Beginnings award



## **DoPH Accomplishments**

- The Kansas Infant Mortality Rate for 2015 is the lowest ever recorded: 5.9 per 1,000 live births.
- Early elective deliveries decreased from 8% in 2013 to 2% in 2015. This reduces the chances that infants are born with birth defects or complications that can cause short and long-term health issues.
- As of July 2016, 100% of newborns in Kansas are being screened for Critical Congenital Heart Disease (CCHD) prior to discharge from a birthing facility.



## Thank you

## **Questions?**

